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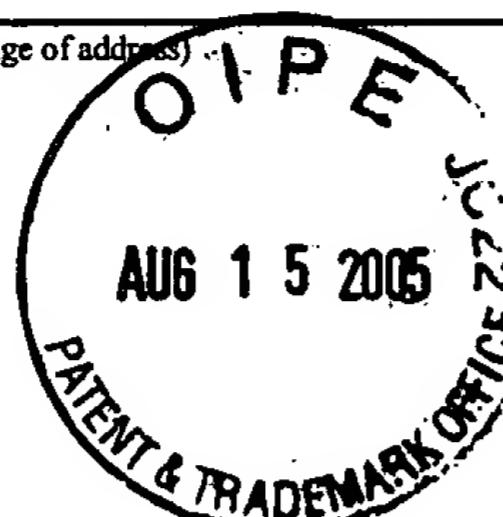
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7590 05/11/2005

MEDLEN & CARROLL LLP
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<i>MEWAIE</i>	(Depositor's name)
<i>M. Gupta</i>	(Signature)
8-11-05	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/613,170	07/10/2000	Tetsufumi Ueda	UM-04496	9234

TITLE OF INVENTION: COMPOSITIONS AND METHODS FOR THE INHIBITION OF NEUROTRANSMITTER UPTAKE OF SYNAPTIC VESICLES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	08/11/2005
EXAMINER	ART UNIT		CLASS-SUBCLASS		
GUPTA, ANISH	1654		530-350000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

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Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 68-1290 (enclose an extra copy of this form).

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Authorized Signature Tanya Arenson

Date 8/11/05

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